790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913 Phone: 671.647-5330 Fax: 671.647.5402

PROGRAM PLAN DESCRIPTION < ADULT CRISIS STABILIZATION/ADULT INPATIENT UNIT>:

The adult crisis stabilization unit provides continuous 24-hour observation and supervision for adults eighteen (18) years of age and older with urgent/emergent needs who are a harm to themselves, a harm to others, or gravely disabled. The adult crisis stabilization program provides crisis stabilization services in a safe, structured setting. The unit provides crisis interventions necessary to stabilize and restore the person to a level of functioning which requires a less restrictive level of care.

I. Mission/Philosophy

We are committed to a culture of recovery throughout our systems of care, in our interaction with one another, and with those persons and families who trust us with their care

It is our mission to provide crisis stabilization services in a safe structured setting; restore the person to a level of functioning which requires a less restrictive level of care.

II. Goals/Objectives

• To stabilize acute psychiatric or behavioral symptoms of the person served and restore the level of functioning to deter unnecessary inpatient hospitalization if possible.

III. Location

- Locked unit with individual bedrooms and bathrooms, dining area, court yard, and meeting room for private sessions, family meetings, groups, treatment team meetings, etc.
- 790 Governor Carlos G. Camacho Rd. Tamuning, GU 96913

IV. Days/Hours of Operation

24 hours a day, 7 days a week including all holidays

V. Accessibility

- Intakes are available by appointment or as a walk-in basis
- Most other services are available by appointment
- Contact number for Consumer Registration: 647-5440
- Contact number afterhours, weekends, and holidays is the Inpatient Unit: 647-5417 or Crisis Hotline 647-8833

VI. Services Provided

- Assessments and evaluations
- Individualized treatment planning based on the individual's strengths, needs, abilities, and preferences
- Medication management (Prescriptions and monitoring)
- Psycho-education/education on wellness and recovery (Education on the persons mental health issues and coping skills)
- Group therapy (Group topics commonly include trauma therapy, grief and loss, anger management, self-esteem)
- Activities of daily living skill building
- Recreational therapy
- Case management
- Individual and family therapy/counseling
- Referrals and linkage to outpatient support services including healthcare, housing, benefits, transportation, legal assistance, substance abuse support services, and vocational needs
- Discharge or transition planning

Referrals to additional adult crisis stabilization services

- Acute medical needs referred to Guam Memorial Hospital (GMH), Naval Hospital, or another acute medical facility
- Detoxification needs referred to referred to Guam Memorial Hospital (GMH), Naval Hospital, or another acute medical facility

VII. Service Population

- Individuals 18 years of age and older
- Individuals with mental health diagnosis (symptoms consistent with most current version of DSM diagnosis)
- Individuals who are an imminent danger to themselves, danger to others, and/or gravely disabled

VIII. Entry/Exit Criteria:

A. Entry Criteria

- Individuals 18 years of age and older
- The individual is medically stable and free of any severe medical problems that could be beyond the capabilities of the staff to treat, as determined by the admitting professional and/or in consultation with the clinicians in the program.

- The Individual demonstrates a significant incapacitating or debilitating disturbance in mood/thought/behavior interfering with ADLs to the extent that immediate stabilization is required; and
- The Individual demonstrates active symptomatology consistent with the most current version of DSM diagnosis which requires and can reasonably be expected to respond to intensive, structured intervention within a brief period of time; and
- Individuals who are an imminent danger to themselves, danger to others, and/or gravely disabled
- The Individual requires 24-hour observation and supervision; and
- Clinical evaluation indicates that the individual can be effectively treated with intensive crisis intervention services and returned to a less intensive level of care within a brief time frame; and

B. Exit Criteria:

- Consumer choice, or leave against medical advice, and it is determined that the individual has the capacity to make an informed decision and does not meet criteria for an involuntary admission.
- The individual develops a medical condition or has a medical emergency that requires admission to an acute care medical facility.
- Completion of Treatment Program.
 The individual no longer meets admission criteria

IX. Payer Sources

Government of Guam

X. Fees

• All services are free of charge

XI. Referral Sources

- Self, guardian, family, friend, government agencies, community agencies, internal, private providers
 - The intake worker will complete the intake assessment and consult with the psychiatrist to determine the appropriateness of admission.
- 24- hour crisis hotline

XII. Staffing/Program Capacity

A. Program Capacity:

• Adult in patient unit has 16 bed capacity

B. Staffing Ratio:

• 1 registered nurse and 2 psychiatric technician

C. Staffing Qualifications:

- Registered Nurse,
- Psychiatric technician
- Licensed Attending Psychiatrist, Psychiatrist on call

XIII. Needs Assessment

Guam Behavioral Health and Wellness Center serve mentally ill patients in the Island of Guam; servicing 3000 consumers annually. Often the onset of mental illness occurs in early adulthood resulting in disruption of normal developmental experiences. As a result, adults can begin a cycle of psychiatric hospitalizations with periods of remission that may leave them picking up the pieces of their lives, mainly rebuilding families and locating employment. Many adults could function competently in the community with basic mental health support, such as medication monitoring and counseling. However, there is a percentage that would relapse and need crisis stabilization treatment.

XIV. Caseload Characteristics/Need That the Program Is Addressing (including special populations)

The Adult Inpatient Unit or Adult Crisis Stabilization serves more than 30 adults in a month with urgent/emergent needs that are harm to themselves, harm to others, or gravely disabled. 75% are local Chamorros and other pacific islander of the Federated States of Micronesia. 14% are Asians of Filipino, Korean, Japanese descent.

The Adult Crisis Stabilization program provides crisis stabilization services in a safe, structured setting. The unit provides crisis interventions necessary to stabilize and restore the person to a level of functioning which requires a less restrictive level of care.

XV. Demand for this Service

Crisis Stabilization program services over 300 consumers annually on the island of Guam.

XVI. Geographic/Cultural Needs and/or Barriers

Crisis stabilization services are provided for the island of Guam as a whole, catering to migrants from the Philippines, Federated States of Micronesia, Republic of Marshall Islands, Palau and other Asian nations. Crisis stabilization is proactive in ensuring that services are culturally and linguistically appropriate services.

XVII. Treatment Modalities/Disciplines

- Treatment Development. An interdisciplinary team involves at least the person serve and the assigned staff member, and can include a psychiatrist, a nurse, a clinician, a case manager, and others appropriate to-/requested by the person served.
- Treatment models include:
 - Brief/solution-focused therapy.

- Cognitive-behavioral therapy.
- Dialectical Behavioral therapy
- Desensitization therapy.
- Family-focused therapy.
- Critical problem solving skills.

XVIII. Referrals/Discharge/Followup

- The AIU refers persons served outside of the program for all legal issues, as well as making transfers to other programs and services.
- Referrals are made for all necessary indicators where services cannot be provided at GBHWC
- Acute medical needs are referred to Guam Memorial Hospital (GMH), Naval Hospital, or another acute medical facility
- Detoxification needs are referred to Guam Memorial Hospital (GMH), Naval Hospital, or another acute medical facility
- Adults or legal guardian may choose to leave the program at any time.
- When a person leaves the program, the outpatient treatment team where the consumer was assigned will conduct a follow up post discharge.

XIX. Grievance/Rights Procedures

• Upon intake all person served are informed of their rights, consent for release of information, and right to privacy as defined by state and federal laws.

XX. Evaluation/Outcomes:

A. Efficiency/Utilization

- adults with serious mental illness admitted in a quarter
- adults discharged from services per quarter
- Length of Stay

B. Effectiveness

Reduction of incidence of relapse.

C. Satisfaction

- 90% of consumers served will express satisfaction with average or higher ratings at discharged
- 90% of sampled consumer served will express satisfaction with average or higher ratings during the year.